

Attorney's Docket No.: 1027550-000177

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of FEB 12 Fit 4: 29)

1747 FED 12 Fil 4: 291

Masao Takinami et al.

Group Art Unit: Unassigned

Application No.: 10/561,816

Examiner: Unassigned

Filed: December 21, 2005

Confirmation No.: 2847

**BODY FLUID SAMPLING IMPLEMENT** 

AND BODY FLUID SAMPLING

METHOD

## **REQUEST FOR REFUND**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Our Deposit Account Statement dated June 2006 was charged a \$200.00 fee (under Code 1201) for an additional independent claim in excess of three. A refund of that excess claim fee is respectfully requested for the following reasons.

This application was filed as a U.S. national stage application under 35 U.S.C. § 371 with a total of 19 claims, including a total of four independent claims. The application was filed with a Credit Card Payment Form in the amount of \$1140.00 for the filing fee (\$900.00), an excess claim fee (\$200.00) and an Assignment recordation fee (\$40.00). Thus, as the excess claim fee of \$200.00 for one extra independent claim was submitted with the application, the \$200.00 fee charged to our Deposit Account was in error.

The Patent Office is thus respectfully requested to refund the excess independent claim fee of \$200.00 and credit such refund to our Deposit Account No. 02-4800.

Request for Corrected Official Filing Receipt
Application No. «Appl No»
Attorney's Docket No. «BDSM Ref»
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Should any questions arise concerning this matter, the undersigned respectfully request that he be contact at the number indicated below.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date: February 9, 2007

: / Eth

Matthew L. Schneider Registration No. 32814

P.O. Box 1404 Alexandria, VA 22313-1404 703 836 6620 Document code: WFEE

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